

# ENROLL US!

## We Want to Be a Member in EPA's Voluntary National Waste Minimization Partnership Program



### GENERAL INFORMATION

Company Name: Naval Institute for Dental and Biomedical Research  
Facility Name: US Navy Dental Treatment Facilities  
Principal Contact: Mark Stone Title: Program Manager  
Facility Location: Building 1-H, 310A B Street City/State/Zip: Great Lakes, Illinois 60088  
Phone Number: (847) 688-1900, ext. 83619 Fax: (847) 578-3793  
Email: mark.stone@ndri.med.navy.mil

### PARTNER AGREEMENT

Our organization/company is choosing to become a partner in EPA's National Waste Minimization Partnership Program. Our goal is to reduce the quantity of one or more Waste Minimization Priority Chemicals currently found in our hazardous and/or nonhazardous wastes using source reduction and/or recycling practices in lieu of waste treatment or land disposal practices. In this enrollment application, we identify one or more voluntary waste minimization goals that we believe we can achieve as Partners in this Program. The voluntary goals provided below are initial estimates and may change over time. We may revise our goals or withdraw from the program at any time. If/when we choose to revise our goals or withdraw from the program, we will notify EPA.

#### **GOAL #1: Chemical Name:** Mercury **CASRN:** 7439-97-6

Narrative description of proposed project and the method you will use to measure success:

Purchase and install advanced amalgam separators for the removal of both amalgam particulate and dissolved mercury from dental wastewater in all 173 Navy Dental treatment facilities (approximately 2500 dental chairs).

1. Our voluntary source reduction goal for Chemical #1 is to reduce the amount of this chemical generated in hazardous waste from a baseline amount of 550.0 pounds in November, 2003 to a reduced amount of 1.10 pounds by October, 2006.
2. To accomplish this goal, we will explore the following source reduction options: (Check all that apply)  

<input checked="" type="checkbox"/> Equipment or technology modifications	<input type="checkbox"/> Process or procedure modifications
<input type="checkbox"/> Reformulation or redesign of products	<input type="checkbox"/> Substitution of less toxic raw materials
<input type="checkbox"/> Improvements in inventory control	<input type="checkbox"/> Improvements in maintenance/housekeeping practices
<input type="checkbox"/> Other (explain): _____	
3. Our (optional) voluntary recycling goal for Chemical #1 is to increase the amount of waste Chemical #1 recycled from a baseline amount of \_\_\_\_\_ (x lbs/year) in \_\_\_\_\_ (month/year), to an increased recycled quantity of \_\_\_\_\_ (x lbs/year) by \_\_\_\_\_ (month/year).
4. To accomplish this recycling goal, we will explore: (check all that apply)  

<input type="checkbox"/> Direct use/reuse in a process to make a product	<input type="checkbox"/> Process the waste to recover or regenerate a usable product
<input type="checkbox"/> Use/reuse as a substitute for a commercial product	<input type="checkbox"/> Other (explain): _____

Authorizing Official: Mark Stone

Date: 18 November 2003

Title: Program Manager

Project Contact (if different from Company Official): \_\_\_\_\_ Phone: \_\_\_\_\_

NOTE: Use supplemental sheets for additional goals.